

2017 Youth Sports Grants Application
City of Middletown Recreation & Community Services Department

The Middletown Recreation & Community Services Department is accepting applications for Youth Sports Grant Funding beginning December 15, 2016. Those eligible to apply for grant funds are teams, leagues and teams of one. This grant is for Middletown teams with only Middletown players. If non-residents are a part of a team, the grant may be denied. The grant is strictly for the benefit of Middletown children playing on local teams.

Municipal grant awards: Unless specifically approved by the Common Council, all grants requiring the expenditure of any City funds must have a 1:1 matching requirement so that every dollar expended by the City is matched by a dollar expended by non-City sources. No City funds may be used in meeting this dollar-for-dollar matching requirement, nor may any in-kind services be used as equivalents to meet the matching requirement. Every dollar expended by the City must be matched by an actual dollar expended by non-City sources. When applying for municipal grants, the prospective grant recipients must submit copies of the organization's budget from the prior year and the year in which the grant is sought, financial statements for the most current reporting period, and a list of funding sources for the prior year and the year in which the grant is requested.

[Added 5-2-2016 by Ord. No. 07-16]

Application Instructions

Carefully read the attached information and complete and submit one copy of your application and all requested materials. Applications must be received by January 16, 2017 by 4:30 pm.

Mail/Drop or E-mail your application to:

Middletown Recreation & Community Services Department
61 Durant Terrace
Middletown, CT 06457

Review Process

Recreation staff and Recreation and Community Services Commission will review the applications. The process may include requests for additional information and site visits. The R&CS Commission may ask the league to send a representative to a Commission meeting for questioning. Staff may also seek information from individuals and/or organizations in the community that are likely to be familiar with your agency and its programs.

Staff recommendations will be presented to the Recreation & Community Services Commission and Middletown Common Council. The Common Council will make all final funding decisions.

If you have any questions regarding the application or process, please contact Debbie Stanley at 860-638-4501 or debbie.stanley@middletownct.gov.

Date of application: ____/____/____

Organization Name: _____

Fiscal Agent, if applicable: _____

Address: _____

Year organization was founded: _____

Name and title of organizational leader: _____

Contact person and title: _____

Telephone: 1. _____ 2. _____

Fax #: _____

Email: _____@_____

Grant request: \$ _____

Project period: ____/____/____ through ____/____/____

Organizational budget for current fiscal year: \$ _____

How did you hear about the Youth Sports Grants?

Proposal Narrative

1. Briefly describe your organization's history and purpose, including a mission statement, if available. _____

2. What type of sports activities do you offer and where do they occur: _____

3. How many weeks are in your season: _____
4. How often does the program meet (e.g. twice a week) and for how long (e.g. 2 hours): _____
5. What else would you like to share with us about your program or the community that this request will serve? Feel free to use specific examples.

6. Who are the key staff members or volunteers leading the program and what experience do they have working with youth? If relevant, briefly describe the role of partner organizations.

7. What challenges do you anticipate in implementing the program this year? How will these be addressed? _____

8. What is the cost for each child to play in the program this year: \$ _____
9. How much of your budget do you expect to spend on financial aid this year: \$ _____
10. How many participants do you expect to offer financial aid to this year: _____
11. How much storage space (square feet) do you expect to use this year: _____ sq ft
12. What dollar amount do you expect to spend on storage space this year: \$ _____

Youth Sports Grants Proposal Checklist

Please include the following items with your proposal:

- Demographic Worksheet (Attachment A)
- Income from admission fees, tournament fees, sponsorship fees and any in-kind services you provide to the City of Middletown
- Line-item total project budget (with income and expenses) for the proposed grant year (provide your organization's audit, if available)
- Signed copy of attached Non-Discrimination Policy Statement
- Signed document stating that all staff and volunteers have had a clear background check
- Current Certificate of Liability Insurance
- Evidence of Nonprofit Status: Copy of letter from IRS certifying your organization's or fiscal sponsor's federal tax-exempt status. If you have a fiscal sponsor, also include a letter from them authorizing the application.

Non-Discrimination Policy Statement

The City of Middletown Recreation & Community Services embraces the principles set forth in this policy and expects recipients of our funds to likewise have a commitment to these principles. The City of Middletown will not provide support to organizations which, in their constitution or practice, discriminate against a person or group on the basis of:

- Age
- Political affiliation
- Race
- National origin
- Ethnicity
- Gender
- Disability
- Sexual orientation
- Religious belief

The City of Middletown supports organizations that target specific individuals or groups who have been subject to economic, social, political or other forms of discrimination.

The organization I represent complies with the non-discrimination policy stated above. Additionally, I have read and agree to abide by the Sports Grants Financial Aid Rules and Application.

Presidents Name (print)

Organization Name

Signature

Organization Address

Date

Attachment A
Project Demographics

Please complete one demographics sheet for each sports program (make additional copies of this sheet if necessary)

1. How many youth do you expect will pass through your program this year:_____

2. What do you consider a "successful" attendance rate for a youth in this program:
(frequency and duration; Example: 3times/week for at least 3 months)

3. How do you plan to keep attendance?

☐ Paper ☐ Youth sign-in ☐ We don't keep attendance
☐ Computer ☐ Coach records ☐ Other _____

5. How do you determine "low-income" status among your participants? _____

6. To the best of your knowledge, how many of your Core Participants will be low-income? _____

7. Will you use this grant to expand your program? ☐ Yes ☐ NO

Please describe your **CORE PARTICIPANTS:**

If you DO NOT plan to use this grant to support expansion in your program, do not fill out column 2. You do not need to provide the ethnic breakdown for additional participants.

	COLUMN 1 Current # of Participants	COLUMN 2** #of Core participants you plan to add because of this grant
Female	_____	_____
Male	_____	_____
African American	_____	_____
Asian American	_____	_____
Caucasian	_____	_____
Latino	_____	_____
Native American	_____	_____
Pacific Islander	_____	_____
More Than One Ethnicity	_____	_____
Other Ethnicity:	_____	_____
Elementary school-age (5-11)	_____	_____
Middle school-age (11-14)	_____	_____
High school-age (14-19)	_____	_____